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PTO/SB/21 (08-00)

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75978/10786

TRANSMITTAL FORM (to be used for all correspondence after initial filing) TRANSMITTAL Filing Date O2/20/2001 RECEIVED First Named Inventor Group Art Unit Unknown Examiner Name James Grunn TECH CENTER 1600/2900

Attorney Docket Number

ENCLOSURES (check all that apply) After Allowance Communication Assignment Papers Fee Transmittal Form (for an Application) Appeal Communication to Board Fee Attached Drawing(s) of Appeals and Interferences Appeal Communication to Group Licensing-related Papers Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition After Final Proprietary Information Petition to Convert to a Affidavits/declaration(s) **Provisional Application** Status Letter Power of Attorney, Revocation Change of Correspondence Address Other Enclosure(s) (please **Extension of Time Request** identify below): Terminal Disclaimer Request for Withdrawal as **Express Abandonment Request** Attorney or Agent. Request for Refund Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Document(s) Remarks Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Susan L. Mizer, Reg. No. 38,245 Arter & Hadden LLP Individual name Signature Date

4

Typed or printed name

Signature

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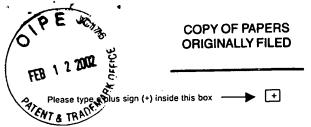
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Docket No.: 75978/10734



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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/701,818	PEAR	
Filing Date	02/20/2001	NECF	/FN
First Named Inventor	Rylatt et al.	EF0	, –)
Group Art Unit	Unknown	LER 1 9 Y	<i>0</i> 02
Examiner Name	James Grunn	TECH CENTER -	
Attorney Docket Number	75978/10786	OF WIEH 16	00/2900

To: Assistant Commissioner for Patents Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

Applicant has procured other counsel and has requested the law firm of Arter & Hadden, including all attorneys associated with Customer No. 23380, to transfer applicant's file to the lawfirm of Baker & McKenzie, whose address is listed below.

The correspondence address is NOT affected by this withdrawal.							
2. Change the correspondence address and direct all future correspondence to:							
	CORRESPONDENCE ADDRESS						
Customer Number			t t	Place Customer Number Bar Code Label here			
OR							
Firm or Individual Name	James D. Jacobs, Esq.,						
Address	Baker & McKenzie						
Address	805 Third Avenue						
City	New York	State	NY	ZIP	10022		
Country	United States						
Telephone	(212) 891-3951	Fax (212) 759-9133				
This request is enclosed in triplicate.							
Name Susa	L. Mizer, Reg. No. 38,245						
Signature XV	12-						
Date (13/02						
NOTE: Withdrawal is effective	e when approved rather than when received	<i>1.</i>					

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Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.